

**Center for Educational Performance and Information
MEIS Security Agreement to Access the
School Infrastructure Database (SID) Application**

District Code: _____ ISD Code: _____

District Name: _____

Step 1. Name of the designated individual whom the Superintendent authorizes to submit the SID data for the district.

Name	Title
E-mail Address	Phone Number

Step 2. For the authorized individual: If you already have an MEIS account, go to Step 4. Separate security agreements must be completed and faxed for each MEIS application (e.g., Single Record Student Database, School Code Master, School Infrastructure Database, Financial Information Database, Registry of Educational Personnel, Credential Data Exchange, Grants, Pupil Transportation). If you do not already have an MEIS account number, use Internet Explorer to access the Internet and go to the following URL: <http://www.michigan.gov/meis>.

Step 3. Click on the MEIS logo. On the next screen, click on "**Create an MEIS Account.**" There you will be instructed on how to create a new account.

Step 4. Once an MEIS account number is obtained, please enter the following requested information:

Authorized MEIS Account Number (e.g., A1234567): _____
Authorized MEIS Account Login Name (e.g., smithjan): _____

Please complete the next line if you are replacing a formerly authorized individual. (*Check all boxes that apply.*)

Name of Formerly Authorized Individual	MEIS Account Number	MEIS Login Name
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- ☐ Please remove this individual from the SID application (i.e., s/he is no longer responsible for the SID).
☐ Please close this individual's MEIS account (i.e., s/he is no longer employed by this district).

Step 5. For the authorized individual: *Please sign below.*

I agree to protect my user identification and password from unauthorized use. I understand all access under my user ID is my responsibility.

<u>Signature of Individual to be Authorized</u>	Date
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Step 6. For the Superintendent: *Please Sign Below.*

I attest that the above-named individual is authorized by me to submit SID data to the Michigan Education Information System for my district and that the data are current and accurate.

Name of District/Agency

Signature of Superintendent	Date
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Step 7. Mail or fax this form to:

**DIT Client Service Center
235 S. Grand, Suite 304
Lansing, Michigan 48913
Fax #: (517) 241-8439
E-mail: Help-Desk@michigan.gov**